

**PART B—ISSUE FEE TRANSMITTAL**

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

605-242  
42-561  
B

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)			
 <p>LYON &amp; LYON 34TH FLOOR 611 W. SIXTH STREET LOS ANGELES, CA 90017</p>		<b>INVENTOR'S NAME</b> <hr/> <b>Street Address</b> <hr/> <b>City, State and ZIP Code</b> <hr/> <b>CO-INVENTOR'S NAME</b> <hr/> <b>Street Address</b> <hr/> <b>City, State and ZIP Code</b> <hr/>			
<input type="checkbox"/> Check if additional changes are on reverse side					
SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT		DATE MAILED
08147139	11/03/93	015	LAYNO, B		3304 11/29/94
First Named Applicant GLUCK, ADRIAN					
TRADING CARD WITH THREE-DIMENSIONAL EFFECT					

3	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3	204151	273-293.000	665	UTILITY	YES	\$605.00	02/28/95

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 12-2475. A duplicate copy of this sheet is enclosed.

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
Lyon & Lyon First Interstate World Center 633 West Fifth Street, Suite 4700 Los Angeles, CA 90071-2066	1 <u>LYON &amp; LYON</u> 2 _____ 3 _____

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080 KK 03/15/95 08147139	1 242 605.00 CK
080 KK 03/15/95 08147139	1 561 42.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		CHECK NO. 31901
(1) NAME OF ASSIGNEE: <u>LASERVISION PRODUCTIONS, INC.</u>		6a. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies <u>14</u>
(2) ADDRESS: (CITY & STATE OR COUNTRY) <u>NEWPORT BEACH, CALIFORNIA</u>		6b. The following fee should be charged to: DEPOSIT ACCOUNT NUMBER <u>12-2475</u> (ENCLOSE PART C) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____ <input checked="" type="checkbox"/> Any Deficiencies In Enclosed Fees _____

A.  This application is NOT assigned.  
 Assignment previously submitted to the Patent and Trademark Office.  
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**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Authorized Signature) <u>Hal Corneil</u>	(Date) <u>2/28/95</u>
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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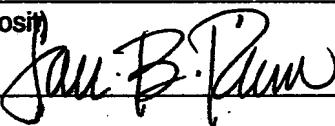
FEBRUARY 28, 1995

on \_\_\_\_\_

(Date)

LAURA B. RIVERO

(Name of person making deposit)

  
(Signature)

2/28/95

(Date)

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Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Office of Information Systems, Patent and Trademark Office, Washington, D.C. 20231, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, (Project 0651-0033), Washington, D.C. 20503. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks, Box Issue Fee, Washington, DC 20231.